

PLACE STICKER AT TOP OF ENVELOPE OR TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tara Z Oliver  
6750 Bramble Ave  
#17  
Cinti, OH 45227

A. Signature

X *Larry Oliver* ☒ Agent  
☐ Addressee

B. Received by (Printed Name)

*Larry Oliver*

C. Date of Delivery

*9-6-03*

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7001 2510 0008 6347 8903

PS Form 3811, August 2001

**SSB**

Domestic Return Receipt

102595-02-M-0835

